

The Boeing Company  
P.O. Box 16858  
Philadelphia, PA 19142-0858

November 20, 2017

Fed-ex: 7707 8947 5454


PA DEP Southeast Region  
Asbestos Notification  
2 East Main Street  
Norristown, PA 19401-4915

Dear Madam or Sir,

Enclosed please find an Asbestos Abatement and Demolition/Renovation Notification Form for activities to take place beginning December 4, 2017 at Boeing Philadelphia. The project is to consist of removal of 840 square feet of Transite Board, 124 square feet of Transite Soffit, 12 square feet of pipe insulation, and 10 linear feet of pipe insulation elbows in our building 3-57.

If there are any questions or additional information is required, please contact me at 610-390-7651 between 6:00 and 2:30 or by e-mail at [jeffrey.holmes@boeing.com](mailto:jeffrey.holmes@boeing.com).

Sincerely,

  
Jeffrey A. Holmes  
Environmental Engineer

RECEIVED  
NOV 21 2017

Pesticides & Asbestos Programs  
and Enforcement Branch (3LC62)  
EPA Region III

cc:

Asbestos NESHAP Coordinator (3WC32)  
US EPA Region III  
1650 Arch Street  
Philadelphia, PA 19103-2029



**pennsylvania**  
DEPARTMENT OF ENVIRONMENTAL  
PROTECTION

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF AIR QUALITY

# ASBESTOS ABATEMENT AND DEMOLITION/RENOVATION NOTIFICATION FORM

## For Official Use Only

Date Received 1

Date Received 2

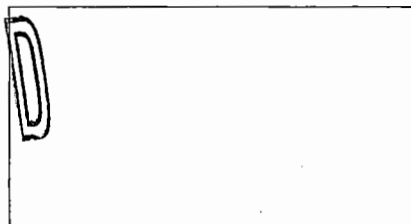
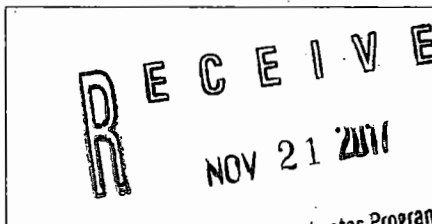
Postmark Date: \_\_\_\_\_

Project ID#: \_\_\_\_\_

Permit #: \_\_\_\_\_

Other #: \_\_\_\_\_

Inspector: \_\_\_\_\_



Pesticides & Asbestos Programs  
and Enforcement Branch (31C62)  
EPA Region III

NOTICE: This is not a valid asbestos abatement notification for the purposes of the Asbestos, Occupations Accreditation and Certification Act unless individuals and contractors have met the certification requirements as set forth in the Asbestos, Occupations Accreditation and Certification Act, Act of 1990, P.L. 805, No. 194 (63 P.S. Sections 2101-2112).

## REFER TO THE ATTACHED INSTRUCTIONS FOR INFORMATION AND REQUIREMENTS.

### TYPE OF NOTIFICATION (check one):

☒ Initial☐ Annual Notification☐ Revision (highlight here, and changes)☐ Phase of Annual Notification☐ Postponement☐ Cancellation

Date of Initial Notification or, if previously revised, date of last revision: \_\_\_\_\_

### PROJECT LOCATION (check one):

☐ Allegheny County☐ City of Philadelphia☒ Other Location in PA (specify county): Delaware☐ Municipality (specify): \_\_\_\_\_

### FOR ALLEGHENY COUNTY AND CITY OF PHILADELPHIA PROJECTS ONLY:

A. Does this project require a permit? ☐ Yes ☐ No (If Yes is checked, a permit application must be submitted along with this notification and approved prior to the start of the project.)

B. For City of Philadelphia projects requiring a permit:

Asbestos project inspector: \_\_\_\_\_ Certification #: \_\_\_\_\_

Company name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

WILL ALTERNATIVE METHODS TO ANY OF THE APPLICABLE REGULATIONS BE USED? ☐ Yes ☒ No

(If Yes is checked, approval must be obtained prior to the start of the project. Please contact the appropriate DEP regional office or local government agency (see reverse of Instruction Sheet for contact list).

### TYPE OF OPERATION (check all that apply):

☐ Demolition☐ Ordered Demolition☐ Abatement prior to Demolition☒ Renovation☐ Emergency Renovation

### FACILITY DESCRIPTION:

Job No.: \_\_\_\_\_ (see instructions)

Facility Name: Boeing Philadelphia - Building 3-57Street/Rural Address: Route 291 & Stewart Ave.City: Ridley Park State: PA Zip Code: 19078Present use: Manufacturing Prior use: ManufacturingWill the facility be occupied during the abatement activity? ☒ Yes ☐ NoFacility size in square feet: 85,000 # of floors: 3 Age in years: 51

### ABATEMENT CONTRACTOR:

Company name: Ecoservices, LLC

Allegheny County or City of Philadelphia License # (if applicable): \_\_\_\_\_

Street/Rural/POB Address: 303 National Road, Suite BCity: Exton State: PA Zip: 19341Contact: Jack Bally Telephone No. (between 8:00 & 4:30): 610-755-7563

8. DEMOLITION CONTRACTOR:  
 Company name: N/A  
 Street/Rural/POB Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone No. (between 8:00 & 4:30): \_\_\_\_\_

9. FACILITY OWNER:  
 Owner name: Boeing Philadelphia  
 Street/Rural/POB Address: Route 291 & Stewart Ave.  
 City: Ridley Park State: PA Zip: 19078  
 Contact: Jeffrey Holmes Telephone No. (between 8:00 & 4:30): 610-390-7651

10. FACILITY INSPECTION (required for renovation and demolition projects):  
 Building inspector: Vertex Certification #: 019684  
 Date of inspection: 11/13/17 Is any material assumed to be asbestos? ☐ Yes ☒ No  
 Procedure, including analytical method, if appropriate, used to detect the presence of asbestos material:  
Sampling and PLM Analysis

☐ Building is ID and in danger of collapse. An asbestos investigator will be on site during demolition. (Philadelphia only)

1. IS ANY TYPE OF ASBESTOS PRESENT? ☒ Yes ☐ No If Yes, please list in #12.  
 2. TYPE OF ACM, DESCRIPTION & LOCATION OF MATERIAL, APPROXIMATE AMOUNT OF ACM, TYPE OF ABATEMENT AND FINAL AIR CLEARANCE METHOD.

PROVIDE INFORMATION IN THE SPACES BELOW, THEN CONTINUE ON ANOTHER SHEET, IF NECESSARY, USING THE SAME FORMAT.

Code *	Description of material	Location of material (room/floor/area)	Amount of ACM	Code **	Code ***	Code ****
F1	Transite Board	East Side Bldg. 3-57	840	SF	REM	PCM
F1	Transite Soffit	East Side Bldg. 3-57	124	SF	REM	PCM
F1	Window/Door Caulk	East Side Bldg. 3-57	12	SF	REM	PCM
R1	Pipe Insulation Elbows	East Side Bldg. 3-57	10	LF	REM	PCM

Code *	Code **	Code ***	Code ****
Type of ACM	Units	Type of abatement	Final Clearance
F1 - Friable ACM	LF - Linear ft.	REM - Removal	PCM - Phase contrast microscopy
F1 - Cat I nonfriable ACM	SF - Square ft.	CAP - Encapsulation	TEM - Transmission electron microscopy
F2 - Cat II nonfriable ACM	CF - Cubic ft.	CLO - Enclosure	
Note: Allegheny County tests all ACM as friable)		NON - None	

Is this project regulated by NESHAP? ☒ Yes ☐ No

A project that includes the demolition of any defined "facility" is regulated by NESHAP. A renovation project is also regulated by NESHAP when the amounts of friable ACM, or ACM that may be rendered friable, are as follows: 260 LF or 160 SF or 35 CF.

4. OPERATION SCHEDULE(S) (as applicable):

- A. Asbestos abatement: Start Date: 12/4/17 Completion Date: 12/15/17  
 Daily hours of operation: 3:30 ☐ am ☒ pm to 11:30 ☐ am ☒ pm  
 Days of week (check): ☒ Mo ☒ Tu ☒ We ☒ Th ☒ Fr ☐ Sa ☐ Su
- B. Demolition: Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_  
 Daily hours of operation: \_\_\_\_\_ ☐ am ☐ pm to \_\_\_\_\_ ☐ am ☐ pm  
 Days of week (check): ☐ Mo ☐ Tu ☐ We ☐ Th ☐ Fr ☐ Sa ☐ Su
- C. Renovation: Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_  
 Daily hours of operation: \_\_\_\_\_ ☐ am ☐ pm to \_\_\_\_\_ ☐ am ☐ pm  
 Days of week (check): ☐ Mo ☐ Tu ☐ We ☐ Th ☐ Fr ☐ Sa ☐ Su

COMMENTS:

5. DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK:

Remove asbestos containing materials prior to renovation of the building.

6. DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO REMOVE ACM AND TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE:

Danger signs posted. All work in a regulated work area. Removal of transite in tented area with HEPA filtered exhaust utilizing wet methods. Removal of non-friable window caulk manually in a segregated area. Removal of fitting and pipe insulation utilizing containment bag. Wet material and double bag. Utilize HEPA air filtration equipment. Visual inspection at the conclusion and air test prior to re-occupancy.

WASTE TRANSPORTER(S):

- A. Transporter #1 name: Waste Management  
 Street/Rural Address: 5109 Bleigh Avenue  
 City: Philadelphia State: PA Zip: \_\_\_\_\_  
 Contact: Customer Service Telephone: 215-335-0330
- B. Transporter #2 name: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

8. WASTE DISPOSAL SITE(S) (any asbestos containing material):

- A. Landfill name: G.R.O.W.S. North DEP permit #: 100148  
 Street/Rural Address: 1000 New Ford Mill Rd.  
 City: Morrisville State: PA Zip: 19067  
 Contact: Mike Anastasio Telephone: 215-736-0195
- B. Landfill name: \_\_\_\_\_ DEP permit #: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

9. AIR MONITORING FIRM(S):

- A. Company name/individual: The Vertex Companies, Inc.  
 Street/Rural Address: 700 Turner Way, Suite 105  
 City: Aston State: PA Zip: 19014  
 Contact: David Turotsy Telephone: 610-322-0076
- B. Final clearance firm: (if different than 19A) \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_
- Final clearance firm was hired by (check one): ☐ Contractor ☒ Owner  
☐ Other: Explain: \_\_\_\_\_

10. AIR SAMPLE FIRM(S) (City of Philadelphia projects only):

- A. PCM company name/individual: \_\_\_\_\_ Certification #: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_
- B. TEM company name: \_\_\_\_\_ Certification #: \_\_\_\_\_  
 Street/Rural Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

11. FOR EMERGENCY RENOVATIONS:

Date of emergency (mm/dd/yy): \_\_\_\_\_ Hour of emergency: \_\_\_\_\_ ☒ am ☐ pm  
 Description of the sudden, unexpected event:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden as a consequence of complying with the 10 working day notification requirement:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. FOR ORDERED DEMOLITIONS (attach copy of order):  
Government agency that ordered: \_\_\_\_\_  
Name of individual who ordered: \_\_\_\_\_ Title: \_\_\_\_\_  
Date of order (mm/dd/yy): \_\_\_\_\_ Date ordered to begin (mm/dd/yy): \_\_\_\_\_

3. DESCRIPTION OF PROCEDURES TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLED, PULVERIZED, OR REDUCED TO POWDER:  
Stop work, stabilize area, alert client, post signs, utilize wet methods and HEPA equipment to clean up asbestos, present area to client/air sampling inspector to verify re-occupancy standard has been met.

4. PENNSYLVANIA CERTIFICATIONS/LICENSES:  
Project designer: \_\_\_\_\_ Certification #: \_\_\_\_\_  
Contractor (Individual): Linda DeNenno Certification #: 045976  
Supervisor: Linda DeNunno Certification #: 045976  
Contractor (Firm): Ecoservices, LLC Certification #: C0722A

\*\*\*\*\* SIGN BOTH STATEMENTS \*\*\*\*\*

5. I HEREBY CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF 40 CFR PART 61 SUBPART M (if applicable) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING ALL WORKING HOURS, AND I CERTIFY THAT ALL WORK WILL BE DONE IN ACCORDANCE WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL AGENCY RULES AND REGULATIONS.

\_\_\_\_\_  
(Original Signature of Owner/Operator) 11/20/17 (Date)

Printed Name of Owner/Operator: Jeffrey Holmes Title: Environmental Engineer

I HEREBY CERTIFY THAT THE FOREGOING STATEMENTS AND THE INFORMATION CONTAINED IN THIS NOTIFICATION FORM ARE TRUE. THIS CERTIFICATION IS MADE SUBJECT TO THE PENALTIES SET FORTH IN 18 PA C.S. §4904 RELATING TO UNSWORN FALSIFICATION TO AUTHORITIES.

\_\_\_\_\_  
(Original Signature of Owner/Operator) 11/20/17 (Date)

Printed Name of Owner/Operator: Jeffrey Holmes Title: Environmental Engineer

FOR OFFICIAL USE ONLY

ORIGIN ID: HARA (610) 591-4577  
JEFFREY HOLMES  
BOENIG - PHILADELPHIA  
BLDG 3-25113 P25-75  
RT 281 & STEWART AVE  
RIDLEY PARK PA 19078  
UNITED STATES US

SHIP DATE: 20NOV17  
ACTWGT: 1.00 LB  
CAD: 1222509/NET3920

BILL SENDER

TO USEPA REGION 3

ASBESTOS NESHAP COORDINATOR

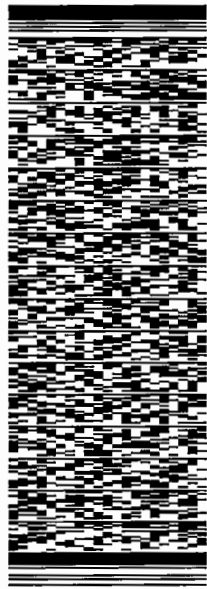
1650 ARCH ST

MAIL CODE 3WC32

PHILADELPHIA PA 19103

(215) 814-2164 REF: ASB 3-57  
PO: DEPT:

549J3/F877104C



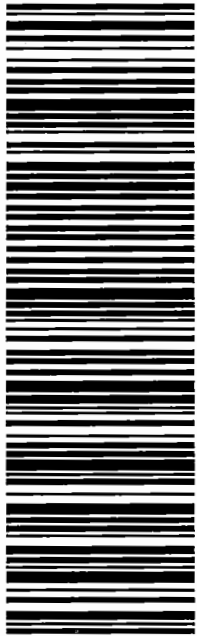
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TRK# 7707 8936 9147  
0201

TUE - 21 NOV 3:00P  
STANDARD OVERNIGHT

17 REDA

19103  
PA-US PHL



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